FORM APPROVED Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: 01 B. WING HAL060054 08/03/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3800 SHAMROCK DRIVE PARKER TERRACE CHARLOTTE, NC 28215 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION ID (X5)(EACH DEFICIENCY MUST BE PRECEDED BY FULL (EACH CORRECTIVE ACTION SHOULD BE COMPLETE PRÉFIX PREFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) C 000 Initial Comments C 000 Report of a Biennial Construction Survey by Ed Miller on August 3, 2016. 1. The building corridors will have handrails installed to support 250lbs in the following areas: Records indicate that this facility was first Second floor lobby including the elevator lobby. licensed as a Home for the Aged on November 9, Third floor lobby and elevator lobby 1999. The facility is currently licensed for 53 beds Handrails will be installed by a qualified, licensed (Located on the 2nd and 3rd floors of the Epworth contractor by 11-1-16 11-1-16 building). Based on this information, we are 2. The building corridor handrails were loose and requiring the facility to meet the 1996 "Homes for maintenance staff have repaired handrails to ensure the Aged and Disabled - Minimum Standards and tightness and stability in the following areas: Regulations", the applicable portions of the 2005 Corridor near bedroom C222 c. Rules for Adult Care Homes, and the 1996 w/ '99 Corridor near bedroom C240 d. Corridor near bedroom C332 rev Edition of the North Carolina State Building Repairs completed on 8-3-16 8-3-16 Code; Section 409 Institutional Occupancy -Group I. Monthly life safety checklist has been revised to include monitoring and inspection of all corridor handrails to Deficiencies were noted which require a Plan of ensure tightness and stability. The corridor handrails in the building will be checked for tightness and stability on a Correction. monthly basis during the Life Safety walk-through Inspection by staff person by administrator, and C 148 Corridors-Handrails C 148 subsequent work orders will be initiated as necessary. 8-4-16 8-4-16 SECTION .0300 - PHYSICAL PLANT Director of Environmental Services or their designee will 10A NCAC 13F .0305 PHYSICAL conduct quarterly audits to ensure accuracy and ENVIRONMENT: effectiveness of the Parker Terrace Monthly Checklist, (g) The requirements for corridors are: which includes properly monitoring and inspection of the (2) Handrails shall be provided on both sides of tightness and stability of handrails in the building, to be corridors at 36 inches above the floor and be monitored in quarterly QA meetings throughout 2016. 8-4-16 8-4-16 capable of supporting a 250 pound concentrated load; This Rule is not met as evidenced by: Based on observation, the building was not providing handrails in all corridors and some handrails may not support 250 pounds. This deficiency affects residents, staff and visitors who use unstable handrails by not providing increased safety, stability/balance, and maneuverability

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

provided by these devices. Findings on August 3, 2016:

Westher

Chief Operating Officer

TITLE

(X6) DATE 9/15/2016 Division of Health Service Regulation

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X3) DATE SURVEY (X2) MULTIPLE CONSTRUCTION AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: 01 B. WING HAL060054 08/03/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3800 SHAMROCK DRIVE PARKER TERRACE CHARLOTTE, NC 28215 (X5) COMPLETE SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X4) ID PREFIX (EACH CORRECTIVE ACTION SHOULD BE (EACH DEFICIENCY MUST BE PRECEDED BY FULL PRÉFIX REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG TAG DEFICIENCY) C 148 Continued From page 1 Second Floor 'Lobby' including the corridor portion of the 'Elevator Lobby' - there was no handrails on these corridors. b. Third Floor 'Lobby' including the corridor portion of the Elevator Lobby - there was no handrails on these corridors. Corridor near Bedroom C222 - the handrail was loose, and may not support a 250 pound concentrated load. Deficiency corrected before Construction Surveyors departed Site. d. Corridor near Bedroom C240 - the handrail was loose, and may not support a 250 pound concentrated load. Deficiency corrected before Construction Surveyors departed Site. e. Corridor near Bedroom C332 - the handrail was loose, and may not support a 250 pound concentrated load. Deficiency corrected before Construction Surveyors departed Site. C 166 C 166 Housekeeping-Maintained Free of Hazards C 166 The backflow prevention device was installed during inspection to prevent the backflow of gray water into SECTION .0300 - PHYSICAL PLANT potable water plumbing lines. 8-3-16 8-3-16 10A NCAC 13F .0306 HOUSEKEEPING AND Monthly life safety checklist has been revised to include FURNISHINGS monitoring and inspection of all back flow prevention (a) Adult care homes shall: devices in the facility for presence and proper operation. (5) be maintained in an uncluttered, clean and The backflow prevention devices will be checked for orderly manner, free of all obstructions and presence and proper operation on a monthly basis during hazards: the Life Safety walk-through Inspection by staff person by (e) This Rule shall apply to new and existing administrator, and subsequent work orders will be initiated as necessary. 8-4-16 8-4-16 facilities. Director of Environmental Services or their designee will This Rule is not met as evidenced by: conduct quarterly audits to ensure accuracy and Based on Observation, a hazard was present effectiveness of the Parker Terrace Life Safety Monthly due to the possibility of the backflow of Checklist, which includes properly monitoring and contaminated water into the domestic water inspection of all backflow prevention devices in the building to ensure they are in place and working properly supply. to be monitored in quarterly QA meetings throughout Findings on August 3, 2016: 2016. 8-4-16 8-4-16 a. Bedroom C216 in the Bathroom - the shower had a shower wand with hose long enough to

Division of Health Service Regulation

EL8T21

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: 01 B. WING HAL060054 08/03/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3800 SHAMROCK DRIVE PARKER TERRACE CHARLOTTE, NC 28215 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) C 166 Continued From page 2 C 166 reach gray water which was not equipped with a vacuum breaker to prevent backsiphonage of gray water back into the potable water plumbing lines. Deficiency corrected before Construction Surveyors departed Site. C 183 Fire Extinguishers C 183 C 183 1a. Fire extinguisher was fully inspected by a qualified and licensed contractor. 9-1-16 9-1-16 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 FIRE EXTINGUISHERS All fire extinguishers in the unit were inspected to ensure (a) At least one five pound or larger (net charge) that all extinguishers were properly inspected. 9-1-16 9-1-16 A-B-C type fire extinguisher is required for each Monthly life safety checklist has been revised to include 2,500 square feet of floor area or fraction thereof. monitoring and inspection of all fire extinguishers to (b) One five pound or larger (net charge) A-B-C ensure all extinguishers are properly inspected and fully or CO/2 type is required in the kitchen and, where operational with no defects. All the fire extinguishers will applicable, in the maintenance shop. be monitored during the Parker Terrace Monthly Life Safety walk-through Inspection by staff person by administrator, and subsequent work orders will be This Rule is not met as evidenced by: initiated as necessary. 8-4-16 8-4-16 Based on observation, the facility failed to properly maintain the fire extinguishers and Director of Environmental Services or their designee will associated equipment. This could hamper staffs conduct quarterly audits to ensure accuracy and ability to extinguish a small fire and permit it to effectiveness of the Parker Terrace Life Safety Monthly grow larger. This would affect all residents, staff Checklist, which includes properly monitoring and inspection of all fire extinguishers, to be monitored in and visitors by not identifying emergency quarterly QA meetings throughout 2016. 8-4-16 8-4-16 equipment not in proper working order. Findings on August 3, 2016: Corridor across Second Floor Med Room the last annual maintenance check of the portable fire extinguishers was last performed in C 189 1a. Bedroom C 211 Sprinkler head with lint was cleaned May 2015. during inspection 8-3-16 1b. Bedroom Second Floor Med-Room - Sprinkler head C 189 Building Equipment Maintained Safe, Operating C 189 with lint was cleaned during inspection 8-3-16 1c. Bedroom Second Floor Utility - Sprinkler head with lint was cleaned during inspection 8-3-16 8-3-16 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER 2a. Second Floor Med Room - Gap is scheduled to be REQUIREMENTS filled with approved fire blocking material to prevent the (a) The building and all fire safety, electrical, spread of fire and smoke by a qualified technician by mechanical, and plumbing equipment in an adult 10-1-16. 10-1-16. care home shall be maintained in a safe and

Division of Health Service Regulation

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: 01 B. WING HAL060054 08/03/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3800 SHAMROCK DRIVE PARKER TERRACE CHARLOTTE, NC 28215 (X4) ID SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION lD (X5) COMPLETE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE TAG REGULATORY OR LSC IDENTIFYING INFORMATION) CROSS-REFERENCED TO THE APPROPRIATE DATE TAG DEFICIENCY) C 189 Continued From page 3 C 189 C189 (cont.) 2b. Second Floor Med Room - The open ended sleeve will operating condition. be sealed with approved fire blocking material to prevent (k) This Rule shall apply to new and existing the spread of fire and smoke by qualified technician. facilities with the exception of Paragraph (e) 10-1-16 10-1-16 which shall not apply to existing facilities. 2c. Third Floor Med Room - The holes and gaps around the conduits and cables are scheduled to be fire stopped with approved fire blocking material by a qualified technician on 10-1-16 10-1-16 This Rule is not met as evidenced by: 3a. Bedroom C214 – The door stop was removed from Based on observations and record review. the corridor door during inspection to allow the door to the Building was not maintained in a safe and rapidly release with a push or pull of the door allowing a operating condition. The fire sprinkler heads have positive latch of the door. 8-3-16 8-3-16 3b. Bedroom C340 – Over the door coatrack was become obstructed with debris. This could affect removed during inspection allowing the door to properly all residents, staff and visitors if the fire sprinkler seal and latch. 8-3-16 8-3-16 heads' have their thermal elements insulated with debris causing a delay in the response to a fire. Monthly life safety checklist has been revised to include Findings on August 3, 2016: inspection of door obstructions that prevent the rapid release of the door with a push or pull to close and latch. Bedroom C211 - there was a fire sprinkler Non-obstructive door operation will be monitored on a head which was debris-loaded with lint. monthly basis during the Life Safety walk-through Deficiency corrected before Construction Inspection by staff person by administrator, and Surveyors departed Site. necessary on the spot training of the unlock procedure Second Floor Med Room - there was a fire will be initiated as necessary. 8-4-16 8-4-16 sprinkler head which was debris-loaded with lint. Director of Environmental Services or their designee will Deficiency corrected before Construction conduct quarterly audits to ensure accuracy and Surveyors departed Site. effectiveness of the Parker Terrace Life Safety Monthly Second Floor Utility - there was a fire Checklist, which door obstructions., to be monitored in sprinkler head which was debris-loaded with lint. quarterly QA meetings throughout 2016. 8-4-16 8-4-16 Deficiency corrected before Construction Surveyors departed Site. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose residents, staff and visitors to fire/smoke if not contained in Room or compartment of origin Findings on August 3, 2016: a. Secord Floor Med Room - there was a gap around a cable not firestop as it penetrate the fire-resistance-rated ceiling assembly, allowing the spread of fire and smoke. b. Secord Floor Med Room - there was an open ended sleeve with serval cables not firestop as it

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Division of Health Service Regulation

This Rule is not met as evidenced by:

meetings throughout 2016. 8-4-16

8-4-16

Division of Health Service Regulation STATEMENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: 01 B. WING HAL060054 08/03/2016 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE 3800 SHAMROCK DRIVE PARKER TERRACE CHARLOTTE, NC 28215 SUMMARY STATEMENT OF DEFICIENCIES (X4) ID PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE DATE PRÉFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DEFICIENCY) C 191 | Continued From page 5 C 191 1. Based on Observation, the facility failed to prevent the use of unvented fuel burning room heater(s) portable electric space heater(s) in an Adult Care Home. This could affect residents, staff and visitors if heater was the ignition source of a fire. The danger increases if used by resident or combustible material were near. Findings on August 3, 2016: a. Mech Room near Bedroom C355 - a prohibited portable space electric heater was found in this room.

Division of Health Service Regulation

EL8T21